Motor Speech Disorders Evaluation

Name:
ID/Medical record number:
Date of exam:
Referred by:
Reason for referral:
Medical diagnosis:
Date of onset of diagnosis:
Other relevant medical history/diagnoses/surgery
Medications:
Allergies:
Pain:
Primary languages spoken:
Educational history:
Occupation:
Hearing status:
Vision status:
Tracheostomy:
Mechanical ventilation:

Subjective/Patient Report:

Observations/Informal Assessment:

Mental Status (check all that apply):
__ alert
__ responsive
__ cooperative
__ confused
__ lethargic
__ impulsive
__ uncooperative
__ combative
__ unresponsive

*Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.*
Oral Motor, Respiration, and Phonation

Lips
WNL, mild, mod, severe impairment
Observation at rest (WNL, Edema, Erythema, Lesion): _________________
Symmetry, range, speed, strength, tone:
  Pucker ______________________
  Retraction ____________________
  Alternating pucker/retraction _______________________
Involuntary movement (e.g., chorea, dystonia, fasciculations, myoclonus, spasms, tremor): ____________________________

Tongue
WNL, mild, mod, severe impairment
Observation at rest (WNL, Edema, Erythema, Lesion): _______________________
Symmetry, range, speed, strength, tone:
  Protrusion _______________________
  Retraction _______________________
  Lateralization _____________________
Involuntary movement: _____________________________

Jaw
WNL, mild, mod, severe impairment
Observation at rest: ______________________
Symmetry, range, strength, tone:
  Opening _______________________
  Closing _______________________ 
  Lateralization ____________________
  Protrusion ______________________
  Retraction ______________________
Involuntary movement: ___________________________

Soft palate
WNL, mild, mod, severe impairment
Observation at rest (WNL, Edema, Erythema, Lesion): _________________
Symmetry, range, strength, tone: ________________________________
Elevation ____________________________
Sustained elevation _______________________
Alternating elevation/relaxation ___________________________
Involuntary movement:

Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.
**Respiration/Phonation**

Observations/formal measures administered: ________________________________

<table>
<thead>
<tr>
<th>Activity</th>
<th>Stimulus</th>
<th>Quality</th>
<th>Duration</th>
<th>Loudness</th>
<th>Steadiness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phonation</td>
<td>WNL</td>
<td></td>
<td>___ secs</td>
<td>WNL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Breathy</td>
<td>WNL</td>
<td>___ secs</td>
<td>Mildly impaired</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hoarse</td>
<td>WNL</td>
<td>___ secs</td>
<td>Moderately impaired</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Harsh</td>
<td>WNL</td>
<td>___ secs</td>
<td>Severely impaired</td>
<td></td>
</tr>
<tr>
<td>Oral reading</td>
<td>WNL</td>
<td>WNL</td>
<td>___ secs</td>
<td>WNL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Breathy</td>
<td>Mildly impaired</td>
<td>___ secs</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hoarse</td>
<td>Moderately impaired</td>
<td>___ secs</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Harsh</td>
<td>Severely impaired</td>
<td>___ secs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conversation</td>
<td>WNL</td>
<td>WNL</td>
<td>___ secs</td>
<td>WNL</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Breathy</td>
<td>Mildly impaired</td>
<td>___ secs</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hoarse</td>
<td>Moderately impaired</td>
<td>___ secs</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Harsh</td>
<td>Severely impaired</td>
<td>___ secs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Oral Agility**: Diadochokinetic Rates

<table>
<thead>
<tr>
<th></th>
<th>Duration</th>
<th>Quality</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>P^</td>
<td>__/Per 3 sec.</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
<tr>
<td>T^</td>
<td>__/Per 3 sec.</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
<tr>
<td>K^</td>
<td>__/Per 3 sec.</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
<tr>
<td>P^T^K^</td>
<td>__/Per 3 sec.</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
</tbody>
</table>

Other oral agility: ____________________________________________________________

**Speech Intelligibility**

Standardized dysarthria/apraxia tests: ________________________________
Non-Standardized Tasks: ____________________________________________

<table>
<thead>
<tr>
<th>Stimulus</th>
<th>Severity</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phoneme</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
<tr>
<td>Word</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
<tr>
<td>Sentence</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
<tr>
<td>Conversation</td>
<td>WNL/mild/mod/sev</td>
<td></td>
</tr>
</tbody>
</table>

Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.
Awareness/strategy use

__Limited to no awareness of motor speech impairment
__Aware of motor speech impairment; unable to use strategies to improve intelligibility
__Uses strategies intermittently to improve intelligibility or listener’s understanding of message
__Uses strategies effectively and consistently to improve intelligibility or listener’s understanding of message

Findings

__Motor speech within normal limits
__ (mild, mild-moderate, moderate, moderate-severe, severe) apraxia characterized by __________
__ (mild, mild-moderate, moderate, moderate-severe, severe) dysarthria characterized by __________

Dysarthria type:
__ataxic
__hypokinetic
__hyperkinetic
__spastic
__flaccid
__mixed
__unilateral upper motor neuron

Impact of Motor Speech Impairment on Functioning:

Activity Limitations and Participation Restrictions (check all that apply):

<table>
<thead>
<tr>
<th></th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
</tr>
</thead>
<tbody>
<tr>
<td>General tasks and demands</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household tasks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interpersonal interactions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other___________________</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Safety Risks

Mild Moderate Severe

Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.
Motor Speech Evaluation Template

Being left alone at home _______ _______ _______
Traveling alone in community _______ _______ _______
Other __________________________ _______ _______ _______

Prognosis:
__ Good
__ Fair
__ Poor
Based on __________________________

Recommendations: (check all that apply)
__ Speech-language pathology treatment
  Frequency: _______ Duration: _______
__ Augmentative-Alternative Communication or Speech Generating Device evaluation
__ Other suggested referrals:
  __ Neurology
  __ Otolaryngology
  __ Pulmonology
  __ Other

Patient/Family Education
__ Described results of evaluation
__ Patient expressed understanding of evaluation and agreement with goals and treatment plan
__ Patient expressed understanding of evaluation but refused treatment
__ Family/caregivers expressed understanding of evaluation and agreement with goals and treatment plan.
__ Patient demonstrated recommended strategies
__ Family/caregivers demonstrated recommended strategies
__ Patient requires further education on strategies
__ Family/caregivers require further education on strategies
__ Other __________________________

Treatment Plan

Long Term Goals

Short Term Goals

Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.